Reset Form

FORM
DR-SFA
(Rev 04/2009)
Statement of Organization "Paid For By"
For Office Use Only Comm # 50 Comm # 50 Computer

## FOR INSTRUCTIONS SEE BACK OF FORM

Signature of Candidate, OR, for all other committees. Chairperson

| TOK INSTRUCTIONS SEE BACK OF FORM  | Sompator  |
|--|---|
| This Form to be filed for each:  |   |
| I am filing this form to use the shorter "paid for by" attribution filed prior to the distribution or posting of the political material. | n. The committee will <u>not</u> be crossing the \$750 threshold.* This form must be  |
| Amended form updating any previously filed information inc   |   |
| If the committee crosses the threshold + DD + 2:   |   |
| expenditures, or incurring indebtedness exceeding \$750. In addition, th   | tion must be filed within 10 days of the committee's accepting contributions, making<br>a committee will be required to file campaign disclosure reports  |
| COMMITTEE NAME & (A candidate's committee must include   |   |
| (1) Statewide/Legislative/Judge Standing for Retention Candidate   | (2) Statewide PAC (3) State Party (4) County Central Committee er Political Subdivision Candidate (8) County PAC (9) City PAC Ballot Issue (including committee involved in multiple city/county ballot issues) |
| candidate's committee)   | CANDIDATE (mandatory except for a non-candidate committee)  |
| Name 1 1 Tim Day   | Name J P - CL 'S  |
| Mailing Address 1 - 4104 82nd Street   | Mailing Address + 2001 0 : A  |
| Name 1 Tim Day Mailing Address 1 - 7104 82nd Street City, State 1 Zip Code 1 50322   | Mailing Address + 7901 Prairie Avenue  City State + 710 Code + 50322  |
| Phone (515) 276 3212   |   |
| e-Mail Tim. Day @ jacobsonco. com  | Phone (515)_ 276 8653<br>= Mail _ RELAID NCHIC. com   |
| INDICATE PURPOSE OF COMMITTEE - Check One Box De A   | Advocate lanagainst candidate(s)  Advocate against ballot issue(s)  |
| All Candidates Enter: Urhandale City Council   | County/Local Candidates and All Other Committees Enter:   |
| Office Sought Urbandale City Council Political Party (if applicable) N/A   | County PO/K (If active in multiple ballot issue elections, attach list of counties or enter   |
| District   | Statewide")   |
| Year Standing for Election 2013  | Date of Election 11-5-2013  |
| TATEMENT OF AFFIRMATION: By filing this document the committee a   | Africa de Aril  |
| The committee and all persons connected with the committee understand the lower Administrative Code                                      | iat they are subject to the laws in lowa Code chapters 68A and 68B and the administrative   |
| That lowa Code section 68A 405 and rules 351 – 4 38 through 4 43 require talenals except for those items exempted by statute or rule     | the placement of the words 'paid for by' and the name of the committee on all political   |
| That Iowa Code section 68A 503 and rules 351 4 44 through 4 52 prohibit sue PACs   | the receipt of corporate contributions by all committees except for statewide and local ballot  |
| That if the committee exceeds \$750 in campaign activity, a DR-1 Statement sclosure reports  | of Organization must be filed within 10 days and the committee is required to file campaign   |
| That this form is filed prior to the distribution or posting of political material re  | guiting the "paid for by attribution  |
| A new form or amended form is required to be filed for each subsequent elec-   | tion that I am involved   |
| Pos Els  |   |
| 10B E16 )  |   |

Sept 4, 2013